L15000159592

	M)
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(Business Entity Name)	
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COVER LETTER

TO: Registration Sec Division of Corp		, and the second
Einstein Car SUBJECT:	nine, LLC	
30b3Ee1	Name o	Limited Liability Company
		·
The enclosed Articles of A	Amendment and fee(s) an	submitted for filing.
Please return all correspon	idence concerning this m	atter to the following:
	į	
	Bob Killam	
		Name of Person
	Einstein Canine, LLG	
		Firm/Company
	3934 Arkansas Avenu	
		Address
	Saint Petersburg, Flori	da 33703
		City/State and Zip Code
	bob@einsteincanine.co	
	E-mail add	ss: (to be used for future annual report notification)
For further information co	ncerning this matter, plea	se call:
Bob Killam		727 729-1034 at ()
Name of	Person	Area Code Daytime Telephone Number
Enclosed is a check for the	e following amount:	
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Statu	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy
		(additional copy is enclosed)
MAILING ADDRESS:		STREET/COURIER ADDRESS:
Registration Section Division of Corporations		Registration Section Division of Corporations
P.O. Box 6327		Clifton Building
Tallahas	see, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Einstein Canine, LLC	Ш		
(Name of the Lin	ited Liability Compa	ny as it now appears on our liability Company)	records.)
	A Florida Limited I	Liability Company)	
The Articles of Organization for this Limited	III Biability Company	were filed on 9/18/2015	and assigned
Florida document number L15000159592	III	were med on	and assigned
rionda document number	<u>. 1861</u> 		
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	 <u>of the limited liab</u> i	ility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:	3934 Arkansas Avenue 1	NE, Saint Petersburg, FL 33703
(Principal office address MUST BE A STRE	INI IET ADDRESS)		
			-
		<u> </u>	
			· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	#	3934 Arkansas Avenue 1	NE, Saint Petersburg, FL 33703
Mailing address MAY BE A POST OFFICE	BOX)		
			-:
			
B. If amending the registered agent and	 d/or registered of	Tice address on our r	
registered agent and/or the new registered	office address here	2.	ent in name of the ne
Name of New Povietored Agents	N/A		
Name of New Registered Agent:			
New Registered Office Address:	Address: 2260 Fifth Ave South. Suite 1		
Enter Florida street addr		address	
	Saint Petersburg		, Florida ³³⁷¹²
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent		·
	1863		
hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the company has been notified in writing of this	per and complete parts as part	performance of my duti provided for in Chapter	es, and I am familiar with and 605, F.S. Or, if this document is
	If Chan	ging Registered Agent, <u>Sign</u>	ature of New Registered Agent

If amending Authorized Person(s) authorized or removed from our records:		zed to manage, <u>e</u>	nter the title, name, and add	ress of each person being added
MGR = M AMBR = A	anager uthorized Member			
<u>Title</u>	<u>Name</u>	Add	ress	Type of Action
MGR	Dan Gendreau	141 3	99th Avenue NE	
		Saint	Petersburg, FL 33703	Remove
				☐ Change
	·	<u>H</u> H		Add
			· · · · · · · · · · · · · · · · · · ·	☐ Remove
				Change
				Add
				Remove
				Change
				₹: Add ↓ Remove
				□ Change
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				Remove
				Change
				Remove
		II —		Change
		Page 2 of 3		

3 If amending any other information	, enter change(s) here: (Attach additional s	cheets if necessary)
or in amending any other information	, energetange(s) here. (Autaen additional's	sheets, if freeessary.)
	<u> </u>	
-		
		
	<u>14</u>	
		
		<u>t:</u>
. Effective date, if other than the date	11/14/2017 of filing:	(optional)
(If an effective date is listed, the date must be s	pecific and cannot be prior to date of filing or more that loes not meet the applicable statutory filing requ	an 90 days after filing.) Pursuant to 605.0207 (3)
o) The 90th day after the record	ective date, but not an effective time, is filed:	at 12:01 a.m. on the earlier of:
Dated 11/14/2017 S. Robert K	<u> </u>	
Sienz	ature of incomber or authorized representative of a m	nember
S. Robert Killan	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00